Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

Title:: ACUTE TREATMENT OF HEADACHE WITH

PHENOTHIAZINE ANTIPSYCHOTICS

Attorney Docket Number:: 00064.01R

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:

Small Entity:: Yes

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name:: Ron

Middle Name:: L.

Family Name:: HALE

City of Residence:: Woodside

State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 17085 Skyline Boulevard

City of mailing address:: Woodside

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94062

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Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name:: Peter

Middle Name:: M.

Family Name:: LLOYD

City of Residence:: Walnut Creek, CA

State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 30 Carisa Court

City of mailing address:: Walnut Creek

State or Province of mailing address:: California

Postal or Zip Code of mailing address:: 94597

Given Name:: Amy

Middle Name:: T.

Family Name:: LU

City of Residence::

State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 1090 Valley View Court

City of mailing address:: Los Altos

State or Province of mailing address:: California

Postal or Zip Code of mailing address:: 94024

Applicant Authority type:: Inventor

Primary Citizenship Country: CZ

Status:: Full Capacity

Given Name:: Patrik

Middle Name::

Family Name:: MUNZAR

City of Residence:: Belmont

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State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 2417 Hastings Drive

City of mailing address:: Belmont

State or Province of mailing address:: California

Postal or Zip Code of mailing address:: 94002

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name:: Roman

Middle Name::

Family Name:: SKOWRONSKI

City of Residence:: Palo Alto

State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 4182 Cherry Oaks Place

City of mailing address:: Palo Alto

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94306

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name:: Joshua

Middle Name:: D.

Family Name:: RABINOWITZ

City of Residence:: Mountain View

State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 750 N. Shoreline Boulevard #98

City of mailing address:: Mountain View

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94043

Correspondence Information

Correspondence Customer Number:: 37485

Name:: Elaine C. Stracker

Name:: Alexza Molecular Delivery Corporation

Street of mailing address:: 1001 East Meadow Circle

City of mailing address:: Palo Alto

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94303

Phone number:: (650) 687-3905, (650) 687-3900

Fax Number:: (650) 687-3998

Representative Information

Representative Designation::	Registration number::	Name::
Primary	43,166	Elaine C. Stracker

Domestic Priority Information

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This application	Claims priority to	60/429,404	11/26/2002

Assignee Information

Assignee name:: Alexza Molecular Delivery Corporation

Street of mailing Address:: 1001 East Meadow Circle

City of mailing address:: Palo Alto

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94303